TRACKING WORK-RELATED INJURIES, ILLNESSES, AND HAZARDS

WHAT IS THE PUBLIC HEALTH ISSUE?

- In 2002, more than 4.7 million workers sustained work-related injuries and illnesses in the private sector, and an average of 15 workers died from work-related injuries each day.
- Ongoing surveillance activities in occupational safety and health form the foundation for prevention activities needed to reduce the incidence of work-related injuries and illnesses.

WHAT HAS CDC ACCOMPLISHED?

CDC plays a key role in tracking occupational hazards, diseases, and injuries. CDC supports scientists and public health agencies across the country to conduct research and develop state-based occupational disease and injury surveillance programs. In addition, CDC maintains national databases of occupational injuries and fatalities. With broad stakeholder involvement, CDC has developed a strategic plan to address surveillance needs for the 21st century.

Examples of Program in Action

- CDC provided support to New York City following the World Trade Center (WTC) attacks to track injuries to emergency response workers. Because high numbers of eye injuries were noted, CDC quickly developed and distributed recommendations for prevention. CDC continues to track injuries and illnesses sustained by emergency response and recovery workers at the WTC disaster site. This information will be helpful in disaster preparedness efforts to ensure that emergency response and recovery workers have equipment and training to protect their health and safety.
- CDC's Adult Blood Lead Epidemiology Surveillance (ABLES) program is an ongoing effort to identify and track blood lead levels among U.S. adults. In 2002, an ABLES report showed a decline in the rate of adults with blood lead levels above 25 micrograms per deciliter from a mean of 15.2 adults per 100,000 employed in 1994–1997 to a mean of 13.4 adults per 100,000 employed in 1998-2001 (*MMWR* 2002;13[51][SS11]:1-10).
- With CDC support, the California Department of Health Services (CDHS) worked with community organizations to collect occupational injury and illness data from immigrant workers. CDHS identified a high incidence of carpal tunnel syndrome (CTS) among immigrant women working for garment manufacturers. CDHS worked with employers to identify cost-effective changes for work stations to reduce CTS. This work provided insights into the undercounting of immigrants in surveillance systems and identified cost-effective prevention measures that could be adopted elsewhere.
- CDC's Sentinel Event Notification System for Occupational Risks (SENSOR) program involves ongoing case-based tracking linked actively with intervention activities for selected work-related health events. The New Jersey SENSOR project for silicosis identified highway repair as a high-risk exposure setting for construction workers. As a result, the New Jersey Silica Partnership was established; members include the state Departments of Health and Transportation, the Occupational Safety and Health Administration area office, CDC, industry, and labor associations. This partnership led to the inclusion of silica health and safety language in all state contracts for highway repair projects, the establishment of an education and respiratory protection training program for highway repair workers, and the development of a water spray to reduce silica dust generation.

WHAT ARE THE NEXT STEPS?

CDC has made strides in implementing its strategic surveillance plan, including taking steps to make occupational safety and health data more accessible and user-friendly. The plan will continue to guide future surveillance activities.

For additional information on this or other CDC programs, visit www.cdc.gov/program *January 2004*